1

RECEIVED

SEP - 6 2012

IN THE UNITED STATE DISTRICT NORTHERN DISTRICT OF ILLINOIS				
FIRST JUDICIA	AL DISTRICT THOMAS G. BRUTON			
)	CLERK, U.S. DISTRICT COURT			
EZZARD HOWARD,)				
Plaintiff,)	1:12-cv-07115			
v)	Judge John Z. Lee			
HAROLD WASHINGTON)	Case Magistrate			
COLLEGE)	Judge Arlandor K			
CITY COLLEGES OF CHICAGO,)	Case Magistrate Judge Arlander Keys			
CHERYL L. HYMAN)	\$ 3,000,000.00			
Chancellor,)	Jury Demand			
Defendant,)				
)_				

CIVIL RIGHTS VIOLATION UNDER A TITLE 42 U.S. CODE SECTION 1983 UNDER THE AMERICAN DISABILITY ACT 504, REHABILITATION ACT 0F 1973 TITLE 29 U.S. CODE SEC. 794

NOW COMES, PLAINTIFF, EZZARD HOWARD, Pro se on a Title 42 U.S. Code Sec. 1983 et.

Seq. pursuant to code of the civil procedure by Federal Rule of the American Disability Act

504, Rehabilitation Act of 1973, Title 29 U.S. Code Sec. 794 to give notice to the court to file a

civil complaint and moves this Honorable court to grant his complaint against HAROLD

WASHINGTON COLLEGE, and THE CITY COLLEGES OF CHICAGO.

ASSERTIONS

WHEREFORE, In support of his petition plaintiff states as follows:

PLAINTIFF, EZZARD HOWARD, asserts that his constitutional rights were violated by the HAROLD WASHINGTON COLLEGE 30 E. Lake Street Chicago, ILL 60610 and by THE CITY COLLEGE of CHICAGO 226 W. Jackson Chicago, ILL. 60606 by:

1) Denying him on appeal access to an education from a (GPA and PACE HOLD) based solely on a medical impairment which he took days out of school for, which the law also constitutes as a disability under the Rehabilitation Act Sec. 504 during the spring semester of 2012.

- 2) PALINTIFF, EZZARD HOWARD, further states that Defendant, HAROLD WASHINGTON COLLEGE and THE CITY COLLEGE OF CHICAGO violated his rights to the fifth Amendment double jeopardy clause by requiring him to file a second appeal for the exact same issue for the purpose of registration for the fall semester of 2012 which they then denied based soley on the exact same criteria as the first appeal (which was for PACE HOLD).
- 3) PLAINTIFF, EZZARD HOWARD, asserts that he has filed complaints with the HAROLD WASHINGTON COLLEGE against the English department citing that their grading system was improper and bias. Complaints were filed with department chair and then with V/P of College.

HISTORY

During the Fall semester starting from August 18, 2011 until December 12, 2011

Plaintiff, EZZARD HOWARD, attended the Harold Washington College located at 30 E. Lake Street

Chicago, ILL 60606.During the second week of November, 2011 Plaintiff, EZZARD HOWARD,

became ILL suffering from two medical issues, the first was advance arthritis in his knee due to
a prior surgery. It became very hard to make his way around the campus without medication,
the second medical issue was severe abdominal pains.

Plaintiff, EEZARD HOWARD, had no reason why he was experiencing these pains, he periodically took off days in hopes of feeling better, however, his condition remained the same. Some of plaintiff's professors suggested that he withdraw for the remained of the semester, after consulting with student services and student advisors he was told to remain in class.

Plaintiff finished the semester with Incomplete grades on December 12, 2011, on January 05, 2012 Plaintiff, EZZARD HOWARD, went to the Ambulatory Screening Clinic

at the COOK COUNTY HOSPITTAL, Chicago IL. He was examined by Dr. Greg Papiez would scheduled him for a biopsy of his prostate, and prescribed Ibuprofen 800 MG, for the arthritis and pain in abdominal area along with Dazoxzosin which shrinks the prostate allowing the patient to relieve him self.

Plaintiff, Further states, that he under went a surgical Biopsy on March 21, 2012 and received his surgical results on April 02, 2012 which he tested positive for Cancer due to blood levels, and Gleeson levels. All information was relayed to Harold Washington College as requested to show why days were missed, even after receiving information Harold Washington College refuse to remove (S.P.A.C.) or (P.A.C.E.) hold allowing student to registration.

LEGAL ANALYSIS

PLAINTIFF, EZZARD HOWARD, argues in his analysis that:

1) Defendant, HAROLD WASHINGTON COLLEGE, and the CITY COLLEGES OF CHICAGO, lacks jurisdiction to prevent or bar a student or individual from registering or obtaining Federal Financial Assistance based upon a physical or mental impairment because both institution receive federal financial assistance from the Federal Government and under THE REHABILITATION ACT Sec. 504 Which states:

No qualified individual with a disability in the United States, shall be excluded

From, denied the benefits of, or be subject to discrimination under any program or activity that either receives federal financial assistance or is conducted by any executive agency or U.S. Postal service.

PLAINTIFF, FUTHERMORE, States that under Section 902 DIFINITION OF THE TERM

DISABILITY of the AMERICAN DISABILITY ACT plaintiff disability is clearly defined under Sec. 902.5 Mitigating Measures which states:

The determination of whether a condition constitutes an impairment must be made without regards to mitigating measures. 29 C.F.R. pt.1630 app Sec. 1630 2(h). The availability of reasonable accommodation or auxiliary aids such as hearing aids to alleviate the effects of a condition has no bearing on whether the condition is an impairment. It is the scope or perceived scope of the condition itself, not it's origin or capacity for being corrected, that determines whether a particular condition is an impairment. Further the extent to which the impairment limits the individual's major life activities should be assessed without regards to availability of mitigating measures. 29 C.F.R. pt. 1630 app. Sec. 1630. 2(j).

Plaintiff, EZZARD HOWARD, asserts that the Harold Washington College, and the City Colleges of Chicago grossly violated his right to due process by taking away his right to an education. Plaintiff would ask that this Honorable court rule in his favor and find them liable and award him punitive and compensatory damages and any and all other damages as this Honorable court deems proper.

Plaintiff thanks this Honorable court.

PLAINTIFF, EZZARD HOWARD

PLAINTIFF STATES THAT ALL STATEMENTS ARE TRUE AND CORRECT TO THE BEST OF HIS KNOWLEDGE

SWON TO BEFORE ME THIS 3 DAY OF a gust ,2012

"OFFICIAL SEAL"

BARBARA J. SHEPARD

Notary Public, State of Illinois

My Commission Expires Dec. 12, 2012



DIVISION OF UROLOGY

DEPARTMENT OF SURGERY 1900 West Polk, Suite 465 Chicago, Illinois 60612

Office: (312) 864-5233 Office Fax: (312) 864-9638

Courtney M. P. Hollowell, M.D., FACS Chairman, Division of Urology Department of Surgery

Cook County Health & Hospitals System: Stroger Hospital of Cook County Provident Hospital of Cook County Oak Forest Hospital of Cook County Cermak Health Services of Cook County Cook County Department of Public Health

Juanita Sanders
Assistant to the Chairman
Residency Program Coordinator

Traci P. Beck, M.D.Director, Female Urology
Voiding Dysfunction

John R. Canning, M.D. Administrative Chief, Provident Hospital

Rogelio G. Failma, M.D., SC Attending Urologist Provident Hospital

John T. B. Houston, M.D. Director, Pediatric Urology

Khursheed A. Mallick, M.D. Attending Urologist Oak Forest Hospital

Patricia P. Vidal, M.D. Residency Program Director Administrative Chief, Cermak Urology Health Services

Mark A. Wille, M.D. Attending Urologist

Marin Sekosan, M.D. Urologic Pathology

Patrick Guinan, M.D. Basic Science Urology Research

Marvin Rubenstein, PhD Basic Science Urology Research

Ruth G. Alunen, RN, BSN GU Out-Patient Surgery

Jasmin Cleofe, RN GU Out-Patient Surgery

Jane A. Lange, MS, APRN, BC APN/Nurse Practitioner

Farhana Uddin, PA-C, MS GU Out-Patient Surgery

Willa Williamson, MS, APRN, BC APN/Nurse Practitioner

Date: 4-2-12

Dear Mr. Homond, Eggand

Enclosed is a copy of your Prostate Biopsy results. To discuss the results with your physician, please come to the scheduled appointment given on the day you had your biopsy. If you are unable to make your appointment, please call (312) 864-5221.

Sincerely,

Courtney M. P. Hollowell, M.D., FACS

Chairman of Urology

Cook County Health & Hospitals System

Case: 1:12-cv-07115 Document #: 1 Filed: 09/06/12 Page 7 of 23 PageID #:7

Surgical

HOWARD, EZZARD - 004136211c

* Final Report *

Result Type:

Surgical

Result Date:

March 21, 2012 09:05

Result Status:

Auth (Verified) SURGICAL

Result Title: Encounter info:

0713155216, Stroger, Clinic Outpatient, 3/21/2012 - 3/21/2012

* Final Report *

SURGICAL

HOWARD, EZZARD DOB: 10/04/1962 49 YM

MR#: 4136211 / Pt#: C713155216

Attend: PATRICIA VIDAL Ord: PATRICIA VIDAL

SURGICAL PATHOLOGY REPORT

Case#: CSP-12-5487

Diagnosis:

A. "Prostate, needle biopsy, left base":
Prostatic adenocarcinoma, Gleason score (3 + 3 = 6) involving less than
5% of one of two tissue cores.

B. "Prostate, needle biopsy, left lateral": Benign prostate tissue.

Denign prostate tissue.

C. "Prostate, needle biopsy, left apex": Prostatic adenocarcinoma, Gleason score (3 + 3 = 6), involving 10% of all of the tissue fragments.

D. "Prostate, needle biopsy, right base": Benign prostate tissue.

E. "Prostate, needle biopsy, right lateral": Benign prostate tissue with focal glandular atrophy.

F. "Prostate, needle biopsy, right apex": Benign prostate tissue with glandular atrophy and chronic inflammation.

Printed by: Printed on: ALUNEN, RUTH 4/2/2012 14:25

Page 1 of 4 (Continued)

Case: 1:12-cv-07115 Document #: 1 Filed: 09/06/12 Page 8 of 23 PageID #:8

Surgical

HOWARD, EZZARD - 004136211c

* Final Report *

Note: Immunohistochemical studies utilizing a PIN4 cocktail (P504 racemase, p63, high molecular weight cytokeratin 34BE12) were performed on A, B, C, D, E, and F. In C, the immunostains (which demonstrate the absence of basal cells within the atypical glands), confirm the malignancy. In A, the atypical focus is not present in the section on which the immunostain (PIN4) was performed. In B, D, E, and F, basal cells are highlighted by the immunostains. Additional levels were also reviewed.

The immunohistochemical tests were performed at Alverno Laboratory. At Stroger Hospital, these immunohistochemical studies are interpreted after a review of a negative control for the case and the antibody and a positive control appropriate for each antibody.

Signed Out/Reported:03/30/2012
Pathologist: KAREN FERRER MD, PATHOLOGIST

Microscopic Description : All sections have been examined. The histological findings have been summarized in the final diagnosis above.

IDC: Marin Sekosan, MD

Clinical Info/Hx: A 49-YEAR-OLD BLACK MALE, PSA=5.26.

PREOPERATIVE/POSTOPERATIVE DIAGNOSIS: ELEVATED PSA/NEGATIVE DRE.

Specimen(s) Submitted:

- (A) PROSTATE, NEEDLE BIOPSY, LEFT BASE
- (B) PROSTATE, NEEDLE BIOPSY, LEFT LATERAL
- (C) PROSTATE, NEEDLE BIOPSY, LEFT APEX
- (D) PROSTATE, NEEDLE BIOPSY, RIGHT BASE
- (E) PROSTATE, NEEDLE BIOPSY, RIGHT LATERAL
- (F) PROSTATE, NEEDLE BIOPSY, RIGHT APEX

Printed by:

ALUNEN, RUTH

Printed on:

4/2/2012 14:25

Page 2 of 4 (Continued)

Case: 1:12-cv-07115 Document #: 1 Filed: 09/06/12 Page 9 of 23 PageID #:9

Surgical

HOWARD, EZZARD - 004136211c

* Final Report *

Gross Description

All specimens are received in a container labeled with the patient's name and medical record number.

- A) Specimen labeled "LEFT BASE" is received in formalin and consists of two cores of tissue, measuring 0.6 and 1.2 cm in length, less than 0.1 cm in diameter. The entire specimen is submitted in cassette A1.
- B) Specimen labeled "LEFT LATERAL" is received in formalin and consists of two cores of tissue, measuring 1.2 and 1.4 cm in length, less than 0.1 cm in diameter. The entire specimen is submitted in cassette B1.
- C) Specimen labeled "LEFT APEX" is received in formalin and consists of two cores of tissue, measuring 1.1 and 1.4 cm in length, less than 0.1 cm in diameter. The entire specimen is submitted in cassette C1.
- D) Specimen labeled "RIGHT BASE" is received in formalin and consists of two cores of tissue, measuring 0.6 and 1.4 cm in length, less than 0.1 cm in diameter. The entire specimen is submitted in cassette D1.
- E) Specimen labeled "RIGHT LATERAL" is received in formalin and consists of two cores of tissue, measuring 0.9 and 1.3 cm in length, less than 0.1 cm in diameter. The entire specimen is submitted in cassette E1.
- F) Specimen labeled "RIGHT APEX" is received in formalin and consists of two cores of tissue, measuring 0.7 and 1.1 cm in length, less than 0.1 cm in diameter. The entire specimen is submitted in cassette F1.

(SS)

Printed by: Printed on: ALUNEN, RUTH 4/2/2012 14:25

Page 3 of 4 (Continued)

Case: 1:12-cv-07115 Document #: 1 Filed: 09/06/12 Page 10 of 23 PageID #:10

Surgical

HOWARD, EZZARD - 004136211c

* Final Report *

Electronically Signed: 03/30/2012

KAREN FERRER MD, PATHOLOGIST

The attending pathologist whose signature appears on this report has reviewed the diagnostic slides and has edited the gross and/or microscopic portion of the report in rendering the final diagnosis.

Completed Action List:

* Order by VIDAL, PATRICIA on March 21, 2012 09:05

Printed by: Printed on:

ALUNEN, RUTH 4/2/2012 14:25

Page 4 of 4 (End of Report)

Case: 1:12-cv-07115 Document #: 1 Filed: 09/06/12 Page 11 of 23 PageID #:11

Same Day Surgery

HOWARD, EZZARD - 004136211c

* Final Report *

Result Type:

Same Day Surgery

Result Date: Result Status:

July 05, 2012 15:40 Auth (Verified)

Performed By:

WALKER RN, YOLANDA on July 05, 2012 15:45

Verified By: Encounter info:

WALKER RN, YOLANDA on July 05, 2012 15:45 0716787783, ACHN, Clinic Outpatient, 7/5/2012 -

* Final Report *

SAME DAY SURGERY PRE-OP/POST-OP MEDICATION RECONCILIATION

Allergies: none					
Home Medications/Dose/Route/Frequency/Time (Include Herbai/OTC/Vitamins/ All Medications) Name/dose/route/frequency/duration	Last dose taken ?=unkn	Continue Pre-op and day of surgery	Stop date pre op	Continue at discharge	Start/ Stop at discharge
ibuprofen 800mg oral every day	7/5/12	no	7/23/12		SECTION AND ADDRESS OF
cardura 2 mg oral daily	7/4/12	yes			The Total
					The Control
Information obtained from:	Patient/Fa	mily	Bottles/List	Old Re	cords MD
	Records	Pharmacy	Other:		
NEW MEDICATIONS ORDERED AT DISCHARGE	PURPOSE	S	TART	STO	P
	24.07				
				ı	

Signature Line

Printed by:

WALKER RN, YOLANDA

Printed on:

7/5/2012 15:45

Page 1 of 2 (Continued)

Case: 1:12-cv-07115 Document #: 1 Filed: 09/06/12 Page 12 of 23 PageID #:12

Urology Outpt

HOWARD, EZZARD - 004136211c

* Final Report *

Result Type:

Urology Outpt

Result Date:

July 05, 2012 13:25

Result Status:

Auth (Verified)

Result Title:

GU

Performed By: Verified By: Encounter info: WILLIAMSON CNP, WILLA on July 05, 2012 13:28 WILLIAMSON CNP, WILLA on July 05, 2012 13:46

0716787783, ACHN, Clinic Outpatient, 7/5/2012 -

* Final Report *

GU

Patient: **HOWARD**, **EZZARD**

MRN: 004136211c

FIN: 0716787783

Age: 49 years Sex: Male DOB: 10/4/1962

Associated Diagnoses: None Author: WILLIAMSON CNP, WILLA

Subjective

Chief complaint 49 year old male with history of prostate cancer cTlc, GS6 here today to schedule surgery. Denies LUTS on cardura with improvement noted...

Health Status

Allergies: .

No inactive allergies have been recorded.

Current medications: (Selected).

Prescriptions

Ordered

Metamucil 3.4 gm/5.2 gm oral powder for reconstitution: See Instructions, add 1 tsp of powder to

any liquid BID, 400 GM

doxazosin: 1 MG, 1 TAB, PO, Daily, 30 TAB

ibuprofen 800 mg oral tablet: 800 MG, 1 TAB, PO, TID, 30 TAB, PRN: for pain

senna-docusate 8.6 mg-50 mg oral tablet: 1 TAB, PO, Daily, 100 TAB, PRN: Constipation

Problem list: .

All Problems

Adenocarcinoma of prostate / 185 / Confirmed

Benign prostatic hypertrophy NOS / 600.00 / Confirmed

Objective

General: Alert and oriented.

Printed by:

WILLIAMSON CNP, WILLA

Printed on:

7/5/2012 13:48

Page 1 of 2 (Continued) Case: 1:12-cv-07115 Document #: 1 Filed: 09/06/12 Page 13 of 23 PageID #:13

Urology Outpt

HOWARD, EZZARD - 004136211c

* Final Report *

Respiratory: Respirations are non-labored.
Cardiovascular: Normal rate, Regular rhythm.
Gastrointestinal: Soft, Non-tender, Non-distended.

Integumentary: Intact.

Psychiatric: Cooperative, Appropriate mood & affect.

Impression and Plan

Assessment and Plan:

Diagnosis: CA of prostate: ICD9 185, Working, Medical.

Orders

RRP on 7/30/2012 with Dr Vidal..

Signature Line

Electronically Authored On: 05-Jul-12 13:46

Electronically Signed By: WILLIAMSON CNP, WILLA

SH - Urology - APN Pager/Bus: 312 864 5220

Completed Action List:

- * Perform by WILLIAMSON CNP, WILLA on July 05, 2012 13:28
- * Modify by WILLIAMSON CNP, WILLA on July 05, 2012 13:44
- * Modify by WILLIAMSON CNP, WILLA on July 05, 2012 13:46
- * Sign by WILLIAMSON CNP, WILLA on July 05, 2012 13:46
- * VERIFY by WILLIAMSON CNP, WILLA on July 05, 2012 13:46

Printed by:

WILLIAMSON CNP, WILLA

Printed on:

7/5/2012 13:48

Page 2 of 2 (End of Report)

John H. Strog of Cock Cour	or, Jr. Nespital Ty	GENERAL CONSENT – SURGERY, ANESTHESIA, BLOOD TRANSFUSION		
Date:		am/pm		
☑ Yes	□ No	I,, do hereby authorize and consent to the performance upon myself, or the patient for whom I am guardian, of the surgical procedure described to me as follows: Nadical Retropulsic Prostedady, Assaled Bildled folice Lyngh Wode Dissert		
Yes	□ No	SURGERY: I have been advised that major risks involved in the above surgical procedures are Blook of what for some of thirteen for all evections; permuner		
Yes	□ No	I have been advised of the following existing alternatives in treatment or surgical procedures (Consuling Madiation)		
☑ Yes	□ No	I understand that the above described procedure is to be performed by: Dr and/or and/or		
Yes	□ No	I hereby consent to the admission of observers to the operating room for the purpose of advancing medical education.		
☑ Yes	□ No	ANESTHESIA: I have been advised that anesthesia may be necessary and do hereby consent to the administration of such anesthesia: general, regional, or local, by, or under the supervision of Dr		
Yes	□ No	exception of(If None, so state) BLOOD TRANSFUSION: I authorize the administration of such transfusion or transfusions of whole blood or blood products to the above patient as may be deemed advisable in the judgment of the patient's attending physician, his associates or assistants.		
		I understand and agree that no guarantee or warranty (including the implied warranties of merchantability and fitness) applies to the blood or blood products, which may be supplied to this patient.		
		I accept (on behalf of this patient) all of the risks referred to above.		
☑ Yes	□ No	TESTING AND DISPOSAL OF TISSUE: I hereby consent to the examination, testing or disposal of any tissue or parts, including their use for research purposes, which may be removed, in such manner as may be determined by the hospital, its employees or agents.		
Yes	□ No	PHOTOGRAPHY: I hereby consent to the photographing or televising of the operations or procedures to be performed, and the use of such film or tapes for the purposes of advancing medical education.		
Signature of D(Q	Patient or	Suardian(Relationship)		
Signature of I	octor who	discussed the procedures		
iisted ab		ient or guardian. CK PtNm-HOWARD, EZZARD DOB-10/04/62 Age-49 Y FC-Self Pay Act# 716787783 GU (SC) MR# 4136211		

Form #: 503 Rev: June, 2003



34

John H. Stroger, Jr. Hospital of Cook County Cook County Bureau of Health Services

Education Clinic C 1(English)

PRE-ADMISSION TESTING

Welcome to Clinic C Pre-Admission Testing. You are in this Clinic today to complete a series of brief tests and interviews that are required before surgery. Please do not leave the Clinic area until all items are completed.

Failure to complete required to Pre-Operative tests may cause your surgery to be delayed.

Thank you for your cooperation.

CITICA OLL THE LOFTOWING WHEN IT IS COMBI	EIED
in an incidence	
Anesthesiology Interview (If Needed)	staff initial
Pre-Registration	staff initial 🚜
Einancial Interview	staff initial
Blood Tests [pink line]	staff initial
EKG (Electrocardiogram) (If Needed)[green line]	staff initial Shri
Nursing Interview / Education / Instruction	staff initial w
Nursing Review of Completed Orders	staff initial 🕠
Chest X-Ray (located on the second floor/Clinic M)	staff initial WIA
(Nurse may see you for the second time to confirm all test	s were completed)
We may not follow the above items according to its seque process and reduce waiting time. Please check off each at	nce order to facilitate the bove item when it is done.
You may be required to complete the following in addition Medical Consultation (In this Clinic on a future day)	n to the items listed above. DATE: MA

CK PtNm-HOWARD, EZZARD DOB-10/04/62 Age-49 Y FC Self Pay Act# 717714919 SHCC Same DMR# 413621



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John H. Stroger, Jr. Hospital of Cook County
Cook County Bureau of Health Services

Educación Clinica C 2(Español)

ANÁLISIS DE PRE-INGRESO

Por favor lea los instrucciones

Bienvenido a la Clinica C - Análisis de Pre-Ingreso. Usted se encuentra hoy en esta Clinica para completer una serie de pruebas breves y entrevistas que se requeridos antes de la cirugía. Favor de no salir del area de la Clinica hasta que haya terminado con toda la lista.

Al no completar los análisis Pre-Operativos requeridos puede causar que se cirugía sea retrasada.

Gracias por su cooperación

Por favor revise si todos los examenes estan complete Entrevista de Anestesiologia *Si es Necesario Entrevista Financiera Análisis de Sangre [linea rosa] EKG (Electrocardiograma) * Si es Necesario	staff initialstaff initialstaff initialstaff initialstaff initial		
Entrevista con Enfermeria/Educación/Introducción	staff initial		A CONTRACTOR OF THE CONTRACTOR
Rayos X del Pecho			
(Ubicado en el Segundo piso / Clinica M)			
[línea verde]	staff initial		
Entrevista con Enfermeria Para		-	
Revisa Todas las Ordenes	staff initial		
Nosotros no puede seguir los elementos anteriores de acuerdo a s	su orden de la secuencia pa	ra	·
facilitar el proceso y reducer el tiempo de espera.			7
Por favor indique cuando a terminado cada servicio.	and and the state of the state	veryalistation to the sec	Access of Long Charles and Calculations.
Puede que sea necesario para completar el siguiente además de lo	os elementos arriba		·.

Consulta Medica (En esta Clinica para otro dia en el futuro)

of Cook County
21 S. Winchester Ave., Chiasen Addi 2-cv-0312586465659 ht #: 1 Filed: 09/06/12 Page 17 of YOUR PERSONAL
PRESCRIPTION INFORMATION

ID# 4136211 DOB: 10/04/1962

FOR: HOWARD EZZARD Rx# F6390566 01/05/2012 RITA/ERF 0 REFILLS UNTIL DI: PAPIEZ GREG BUPROFEN TAB 800MG (R) 30EA TAKE 1 TABLET 3 TIMES A DAY WHEN NEEDED FOR PAIN WITH FOOD

BUPROFEN TAB 800MG GENERIC NAME: IBUPROFEN (eye-byoo-PROE-fen)

COMMON USES: This medicine is a nonsteroidal anti-inflammatory drug NSAID) used to treat mild to moderate pain, osteoarthritis, and heumatoid arthritis. It may also be used to treat other conditions as letermined by your doctor.

BEFORE USING THIS MEDICINE: WARNING: THE RISK OF BERIOUS AND SOMETIMES FATAL HEART PROBLEMS, HEART ATTACK, AND STROKE may be increased with the use of this nedicine. This risk may be increased the longer you use this nedicine. Risk may also be higher in patients who have heart problems or who are at risk for heart problems. THIS MEDICINE SHOULD NOT BE USED to treat pain before or after coronary artery neart bypass (CABG) surgery. THE RISK OF SERIOUS AND SOMETIMES FATAL STOMACH AND BOWEL PROBLEMS, including pleeding, ulcers, and holes in the stomach and bowel, is increased vhile using this medicine. These problems may occur at any time luring therapy, with or without symptoms. Elderly patients are at nigher risk for serious stomach problems. Ask your doctor or pharmacist for more information about this medicine and its side effects. some medicines or medical conditions may interact with this medicine. NFORM YOUR DOCTOR OR PHARMACIST of all prescription and ver-the-counter medicine that you are taking. DO NOT TAKE THIS MEDICINE if you are also taking heparins or tacrolimus. ADDITIONAL MONITORING OF YOUR DOSE OR CONDITION may be needed if you ire taking serotonin reuptake blocker medicines such as fluoxetine or italopram, "blood thinners" such as warfarin, bisphosphonates such as ilendronate or risedronate, cyclosporine, corticosteroids such as rednisone, high blood pressure medicines (including ACE inhibitors such is captopril, angiotensin II receptor antagonists such as losarran, and reta-blockers such as metoprolol), "water pills" (diuretics such as urosemide, hydrochlorothiazide, triamterene), lithium, methotrexate, or ISDIRIN. DO NOT START OR STOP ANY MEDICINE without doctor or nharmacist approval. Inform your doctor of any other medical onditions including poorly controlled diabetes, dehydration, heart problems such as heart failure or history of heart attack), swelling of the

hands, feet, or ankles (edema), high blood pressure, history of stroke, blood clotting problems, stomach or bowel problems (such as bleeding or ulcers), history of tobacco use or alcohol use, kidney problems, liver problems, blood or bleeding problems (such as anemia), asthma, growths in the nose (nasal polyps), any allergies (especially history of angioedema with symptoms of lip, tongue, throat swelling), pregnancy, or breast-feeding. USE OF THIS MEDICINE IS NOT RECOMMENDED if you have a history of allergy to aspirin or other NSAIDs (e.g., naproxen, celecoxib). USE OF THIS MEDICINE IS NOT RECOMMENDED if you have history of severe kidney disease or if you are going to have or have recently had coronary artery heart bypass (CABG) surgery. Contact your doctor or pharmacist if you have any questions or concerns about taking this medicine.

HOW TO USE THIS MEDICINE: Follow the directions for using this medicine provided by your doctor. This medicine may come with a medication guide. Read it carefully. Ask your doctor, nurse, or pharmacist any questions that you may have about this medicine. TAKE THIS MEDICINE with a full glass (8 oz./240 ml) of water. DO NOT lie down for 30 minutes after taking this medicine. The dosage is based on your medical condition and response to therapy. If repeat doses are needed, they are usually given 6 or 8 hours apart, or as directed by your doctor. When used in children, the dose is based on your child's weight. Read the product instructions to find the appropriate dose for your child's weight. Consult the pharmacist or doctor if you have questions or if you need help in choosing the appropriate dosage form. THIS MEDICINE MAY BE TAKEN WITH FOOD if it upsets your stomach. Taking it with food may not decrease the risk of stomach or bowel problems (such as bleeding or ulcers) that may occur while taking this medicine. Talk with your doctor or pharmacist if you experience persistent stomach upset. STORE THIS MEDICINE at room temperature, away from heat and light. Do not store in the bathroom.

Annial chosy core Cook County
possible. If it is almost time for your next dose, skin the missed

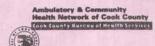
Cook County Bureau of Health Services

CONTINUED ON NEXT PAGE

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Ambulatory & Community Health Network of Cook County

ACHN Progress Notes



				NVH
■ Medicatio	n List Reconciled			NAM
Date	W			stain 4
6/4/2	T: 97,8 P:7	7 RR: 20 B/P:	173/77	
	HT: WT:	BMI:	LNMP:	1
	7/11000	1		Sande to
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	P = Plan	4-11	MR# 4136	211 06/14/12

Form#: ACHN 3061 Rev. June 2006

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ACHN Progress Notes

☐ Medicatio	on List Reconciled	paris
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S = Subjective

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OUTPATIENT PHYSICIANS' LAB ORDER REQUEST LABS WILL NOT BE DONE WITHOUT ATTENDING NAME AND ICD 9 CODES PLACE LABEL or PRINT: LOCATION: EXT: Name: (Last/First): ATTENDING NAME REQUIRED (PRINT): ORDERING PROVIDER'S NAME REQUIRED (PRINT) Pager # CK PINM-HOWARD, EZZARD DOB-10/04/62 Age-49 Y FC-Self Pay Act# 716776265 GU (SC) MR# 41: 06/14/12 MR#4136211 ORDERING PROVIDER'S SIGNATURE REQUIRED DOB: CD-9 CODES REQUIRED OR CAN INDICATE ON REVERSE SIDE: LAB ONLY FIN#: * Indicates tests performed STAT Tube Type: R = Red L = Lavender G=Green B=Blue OUTPATIENT LAB HOURS: Mon - Fri 7:00 AM to 6:00 PM Stroger Campus Check box to order Must indicate test priority: R = Routine T= Timed S = Stat Collection Time CHEMISTRY MICROBIOLOGY **HEMATOLOGY** *Basic Metabolic Panel: Culture, Blood CBC IR Glu, BUN, Creat, Na, K, Cl, CO2, Ca Culture, Urine *CBC and Differential Comprehensive Metabolic Panel: Culture, Throat Reticulocyte Na, K, Cl, CO2, Albumin, AST, ALT, Bun, Creat, Ca Manual Platelet Count Culture, Stool Tot. Bilirubin, Alk. Phos., Tot. Protein, GLU Group B Strep Screen Sickle cell Renal Panel: (Vaginal- Pregnant women) **ESR** R Na, K, Cl, CO2, Glu, BUN, Creat, Ca, Phos, ALB. Culture, Genital (includes GC): PT Liver Profile: Tot. Prot, Alb, Chol, T. Bili., Alk. Phos R Ureth___Vag_ PTT Liver Enzymes: ALT, AST, LDH GC treatment given? INR (Pt on Coumadin) Lipid Profile (patient should fast for 12-14 hrs) R Yes--- No--- Unknown----Bleeding Time (In Vivo) TG, Chol, HDL, LDL, HDL ratio Culture, Mycology G-6-PD Hgb A1C Culture, Sputum Hemoglobin Electrophoresis L Creatine Kinase (CK) R Culture, Mycobacterium: Spec/Source Body Fluid Cell Count Beta HCG Quant R Culture Wound Specify Fluid type *BUN R Wound: Site Creatinine Culture, Anaerobe von Willebrand Profile R В *Fasting Blood Sugar R Spec: Site: IMMUNOLOGY Gestational GTT (1hr) R Ova & Parasite, Stool Haptoglobin R *Glucose Tolerance (3 hr) Cryptococcal Antigen (Red top tube) Ceruloplasmin R RRRRRRR Magnesium GC/Chlamydia Direct C3 Lipase C4 Clostridium difficile (Stool) Lead (Please fill out child's info) G Other Micro Tests: Immunoglobulins, Uric Acid Serum, Quant R Cryoglobulin (37°C) Red cell Folate (Whole Blood) Ferritin Rheumatoid Factor R IENDOCRINOLOGY Vitamin D, 25 Hydroxy T4, Free ANA R Vit B 12 Heterophile Antibodies T3, Free R R URINES TSH RPR R R *Urinalysis in a CUP Thyroglobulin Antibody R **CRP High Sensitivity** R Urinalysis w/ microscopic (CUP) Alpha Fetoprotein (AFP) R TOXICOLOGY *Pregnancy (Urine) CA-125 R Drug Screen, Urine: Total Protein, Urine, Random in a CUP CA19-9 R Amphetamines, Barbiturate Creatinine, Urine, Random CEA R Benzotiozepine, Cocaine, Microalbumin PSA, Screening R Ethyl alcohol, Methadone Urine Electrolytes PSA, Diagnostic R Opiates, PCP Urine Phosphorus Propoxyphen, Cannabinoid FSI LH R Phenytoin Albumin/Creatinine Ratio R VIROLOGY Digoxin Prolactin R R Testosterone, Total Carbamazephine **Hepatitis Profile Acute:** R HBsAg, HBcIgM, Anti-HAV IgM, HCV Estradiol R Other tests: HIV 1 / 2 Antibody Screen R R Progesterone Rubella Antibody Immune Status R Cortisol, Serum Random R Varicella Ab Immune Status R PTH (On ice) Hepatitis B Surface Ag (Perinatal Hep B Screen) R Metanephrine, Plasma On Ice R Hepatits Immune Status: HBsAg, Anti HBsAg R **BLOOD BANK** Hepatitis C Virus Antibody Perinatal **Direct Coombs**

ABO/Rh

Form#1542REV02/2009

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	789.00	Abdominal pain, unspecified site		288.6	Leukocytosis, unspecified
\vdash		Abdominal finding on antenatal screening	\vdash		Lipoprotein deficiency
\vdash			\vdash		
		Abnormal glandular Papanicolaou smear of the cervix	\square		Loss of weight
		Absence of menstruation	Ш		Malignant neoplasm of breast (female), unspecified site
\Box		Abnormal glucose tolerance complicating pregnancy, childbirth		194.8	Malignant neoplasm of other endocrine glands & related
	790.21-790.29	Abnormal glucose tolerance test	\Box	185	Malignant Neoplasm of prostate
\vdash		Abnormal Liver Function Study	\Box	263	Malnutrition of moderate degree
\vdash		Abnormal loss of weight	H		Mild dysplasia of cervix
\vdash		•	\vdash		Missed abortion
		Abnormal weight gain			
	244-244.9	Acquired hypothyroidism	Ш		Mixed hyperlipidemia
	070.51	Acute hepatitis C without mention of hepatic coma		622.12	Moderate dysplasia of cervix
	410-410.92	Acute myocardial infarction	П	278.01	Morbid obesity
\vdash	577	Acute pancreatitis	Н	728.87	Muscle weakness (generalized)
\vdash		Acute post hemorrhagic anemia	Н	238.79	Neoplasm of uncertain behavior of other lymphatic and
\vdash	303.9-303.92		ш		hematopoietic tissues
-			,	226.5	Neoplasm of uncertain behavior of prostate
\perp		Angina pectoris	\vdash		
\square		Anorexia	Ш		Nephrotic Syndrome
	1	Arteriosclerosis	Ш		Neutropenia , unspecified
	571.42	Autoimmune hepatitis			Nocturia
	220	Benign neoplasm of ovary	\Box	305.1	Nondependent tobacco use disorder
		Candidacies of other urogential sites	H	795.08	Nonspecific abnormal papanicolaou smear of cervix
Н		Candidacies of vulva and vagina			unsatisfactory smear
\vdash				705 1	Nonspecific abnormal papanicolaou smear of other site
		Carcinoma in situ of other unspecified sites	\mathbf{H}	704.9	Nonspecific abnormal results of liver function study
		Carcinoma in situ, prostate			
	055.03	Central nervous system malformation in fetus,	\sqcup		Nontoxic nodular goiter
		ante partum condition or complication			Nonspecific elevation of levels of transaminase or LDH
	795.05	Cervical high risk human papillomavirus (HPV) DNA			Obesity
		test positive		790.6	Other abnormal blood chemistry
	616.0	Cervicitis and endocervicitis	\Box	796.4	Other abnormal clinical finding
	655.13	Chromosomal abnormality in fetus, affecting mgmt of mother	\Box	795.09	Other abnormal Papanicolaou smear of cervix and cervical HPV
		Chronic ischemic heart disease, unspecified	\vdash	286.9	Other and unspecified coagulation defects
\vdash		Chronic hepatitis C without mention of hepatic coma	Н		Other and unspecified hyperlipidemia
-	I .		Н		Other disorders of Biliary tract
		Chronic kidney disease	\vdash		-
		Chronic lymphoid leukemia without mention of remission			Other disorders of the thyroid
		Chronic liver disease and cirrhosis		626.8	Other disorder of menstruation and abnormal bleeding from
	577.1	Chronic pancreatitis			female genital tract
	571.5	Cirrhosis of liver without mention of alcohol	\Box	655.83	Other known or suspected fetal abnormality, not elsewhere
	414-414.07	Coronary atherosclerosis			classified, affecting management of mother, ante partum
\vdash		Depressive disorder, not elsewhere classified			condition or complication
\vdash		Diabetetes mellitus without mention of complication,		790 70	Other malaise and fatigue
نـــا	250		Н		Other malignant lymphomas, unspecified site, extra nodal and
	250 050 00	type II or unspecified type, not stated as uncontrolled		202.0	
	ł	Diabetes mellitus and various related codes			solid organ sites
	648	Diabetes mellitus complicating pregnancy childbirth		790.5	Other nonspecific abnormal serum enzyme levels
	787.91	Diarrhea	П		Other organic sleep apnea
	733.9	Disorder of bone and cartilage, unspecified		415.19	Other pulmonary embolism and infarction
	626-626.2	Disorders of menstruation	Н	767.8	Other specified birth trauma
		Disorders of the thyroid gland with hormonal dysfunction	Н		Other specified complications of pregnancy, ante partum
		Dysmenorrhea	ш	040.03	
\vdash					condition or complication
		Dysplasia of cervix, unspecified			Other specified disease of white blood cells
		Edema	Ш	251.1	Other specified hypoglycemia
	659.63	Elderly multigravida, with ante partum condition or complication		281.1	Other Vitamin B 12 Deficiency Anemia, NEC
1 3	659.53	Elderly primigravida, ante partum condition or complication		577-577.9	Pancreatic disease
		Elevated prostate specific antigen (PSA)	\square	281	Pernicious anemia
		Enlargement of lymph nodes	H		Poisoning by insulin and antidiabetic agents
		Esophageal reflux	\mathbf{H}		Renal glycosuria
-	l .	. •	\vdash		
\vdash		Essential hypertension	\mathbf{H}		Retention of urine, unspecified
	ı	Excessive or frequent menstruation	\square		Secondary diabetes mellitus
	628.9	Female infertility of unspecified origin		249.4-249.41	Secondary diabetes mellitus with renal manifestations
	629.81	Habitual aborter without current pregnancy		788.62	Slowing of urinary stream
	646.33	Habitual aborter, ante partum condition or complication		788.65	Straining on urination
		Headache	H		Syncope and collapse
-	1	Heart disease, unspecified	H		Thyroiditis
-	420.2	Heart Giberse, unspecified	-		Thyrotoxicosis with or without goiter
		Heart failure	\mathbf{H}		
_		Hematuria			Unspecified Disorder of prostate
		Hemorrhage of rectum and anus			Unspecified prostatitis
		Human Immunodeficiency virus (HIV) disease		269.2	Unspecified vitamin deficiency
	079.4	Human papilloma virus in conditions classified elsewhere			Urgency of urination
		Hypertensive chronic kidney disease	H		Urinary frequency
		Hypertensive heart and chronic kidney disease	1		Urinary hesitancy
-			Н		
		Hypertensive heart disease	ш	100.3	Urinary incontinence, unspecified
_		Incomplete bladder emptying			
	327-327.09				
	i .	Intestinal Malabsorption			Transfusion of blood products
	280.9	Iron deficiency anemia, unspecified			Long term (current) use of anticoagulants
	626.4	Irregular menstrual cycle	\Box	V58.63	Long term (current) drug use
	782.4	Jaundice, unspecified, not of newborn	П		Long term current use of other medications
		•	لب		
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Case: 1:12-cv-07115 Document #: 1 Filed: 09/06/12 Page 22 of 23 PageID #:22 AMBULATORY COMMUNITY HEALTH NETWORK AND BUREAU

RETURN TO WORK/SCHOOL VERIFICATION

Patient Name CK PINm-HOWARD, EZZARD DOB-10/04/62 Age-49 Y FC-Self Pay Ac# 716240072 ASC (FH) MR# 4136211 O6/05/12 DATE: 6/3/12
Unit Number MR# 4136211
TO WHOM IT MAY CONCERN:
The above named person:
was treated at ASC DU 115/12
was ill and unable to work from: to
states he/she was ill and unable to work from: thru
may return to work/school on:
may resume work on: with restrictions as follows:
may resume school on with the following restrictions:
DIAGNOSIS projeté esterococcions
Physician Signature
Print Name Pager No 3933757
Pt presented on 115/12 with symptoms of
prostète enloyement l'obstruction. Please exerge
his obsence on that toy as he was required to
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GRAPHICS

Prostate gland

